10/00/125

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2001

Application or Docket Number

2209/3481.145

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTITY												
то	TAL CLAIMS		67					RATE	FEE		RATE	FEE
FOR NUMBER FILED				ILED	NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS 67 minus 20=					• 47			X\$ 9=	·	OR	X\$18=	846
INDEPENDENT CLAIMS / minus 3 =					· Ø			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=			+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1586
SMALL ENTER OF SMALL ENTER									MAHT			
H	(Column 1)			(Colu)	SMALL	ADDI-	OR]	SMALL	ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
2 2 2 2	Total	· (O!)	Minus	 (01	-		X\$ 9=		OR	X\$18=	
ARBEI	Independent	• /	Minus	***	3	-		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=.		OR	+280 /	
								TOTAL		20	TOTAL	
ADDIT. FEE										Jon	ADDIT. FEE	
_	400	(Column 1)	i		mn 2) Hest	(Column 3) I	<u>}</u>			1	<u> </u>	
AMENOMENT B		REMAINING AFTER AMENDMENT		NUA PREVI	MBER HOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE /
NO BE	Total	· (Q')	Minus	··· (12	"		X\$ 9=		OR	X\$18=	
AME	Independent	. /	Minus	***)	=		X42=		OR	X84=	7
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
2 21 2/2								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	3.21.00	(Column 1)			ımn 2)	(Column 3	1				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
ENTC	•	CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY D FOB	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. (0,)	Minus	-4	01	<u> </u>		X\$ 9=		OR	X\$18=	
ARGE	Independent	• /	Minus	***	<u></u>	= -	1	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+280=	1		
	If the entry in colu	mn 1 is less than t	he entry in colu	ımn 2, wri	te "0" in co	tumn 3.		TOTAL		OR	TOTAL	
***	If the "Highest Nu "If the "Highest Nu	mber Previously P	aid For IN THI aid For IN TH	S SPACE	is less that is less that	in 20, enter "2) in 3, enter "3."	•	ADDIT. FEE	<u> </u>	OR	ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

10/00/23
Application of Docket Number
22:09/3481.145

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTITY												
TO	TAL CLAIMS		67					RATE	FEE		RATE	FEE
FOR NUMBER FILED					NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS 67 minus 20=					• 47			X\$ 9=		OR	X\$18=	846
INDEPENDENT CLAIMS / minus 3 =					· Ø			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1586
1) . G. () Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL I	THAN
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MOR	Total	· (0°)	Minus	** 4	2			X\$ 9=		OR	X\$18=_	
ARBE	Independent	• /	Minus	***	3	=		X42=		OR	X84= ^	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_	+140=.		OR	+280=	
							_	TOTAL		OR	TOTAL	
10	.19-02	(Column 1)		(Colu	mn 2)	(Column 3)	١	ADDIT. FEE]	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	HEST MBER HOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
202	Total	.67	Minus	L	2)	=		X\$ 9=		OR	X\$1 <u>8</u> =	
ME	Independent	• /	Minus	***	3	=		X42=		OR	X84= _	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ل	+140=		OR	+280=	
,	ь <i>п.</i>	,						TOTAL		OR	TOTAL	
/() 20 C	(Column 1)		(Colu	ımn 2)	(Column 3)	ADDIT. FEE		<u>,</u>	ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY >FOB	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
SE OF	Total	· ()'!	Minus	· · · (9)	,		X\$ 9=		OR	X\$18=	
ARE	Independent	. /	Minus	***	2	= _	4	X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 114							+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20. ADDIT. FEE ADDIT. FEE ADDIT. FEE *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												